10/615, 407

Application or Docket Number

1128.017

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003										
CLAIMS AS FILED - PART I										

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE		OR	OTHER THAI		
TOTAL CLAIMS						ı	RATE	FEE	) 	RATE	FEE	
FO	FOR		25 NUMBER FILED		NUMBE	BER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			25 minus 20=		٠ 5			X\$ 9=	46	OR	X\$18=	
INDEPENDENT CLAIMS3 minus 3				nus 3 =	-			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2					•	TOTAL	420	OR	TOTAL			
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							SMALL E	ENTITY	OR	OTHER SMALL		
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 85	Minus	- 6	?5	= /		X\$ 9=		OR	XS18=	
AME	Independent	. 3	Minus	***	<u>3</u> .			X42=		OR	X84=	
Ц	PIRST PRESE	NTATION OF M	JUITPLE DEF	ENDEN	CLAUM			+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
ENT B		CLAIMS REMAINING AFTER AMENDMENT	14.27 s	PREVI	HEST HBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 21	Minus	* 0	15	= /		X\$ 9=		OR	X\$18=	1
AME	Independent	. 3	Minus	600	3	= /		X42=	/	OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	TCLAIM		J	+140=		OR	+280=/	
							1	TOTAL		OR	YOTAL	
		(Calumn 1)		(Calu	Ol	(Caluma a)		ADDIT. FEE			ADDIT. FEE	<b></b>
		(Column 1) CLAIMS		HIG	mn 2) HEST	(Column 3)		· · ·	ADDI-	ì		ADDI-
ENT C		REMAINING AFTER AMENDMENT		PREV	ABER IOUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
AMENDME	Total	•	Minus	**		9		X\$ 9=		OR	X\$18=	
AME	Independent	•	Minus	***		<u> -                                    </u>	1	X42=		OR	X84=	
L	, FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDEN	IT CLAIM		L	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEE										TOTAL		
		imber Previously P umber Previously F						ADDIT. FEE		OR	ADDIT. FEE	
		mber Previously Pa						und in the ap	propriate bo	ox in ca	olumn 1.	

FORM PTO-875 (Rev. 12/02)

\*U.S. Government Printing Office: 2003 — 498-278/09151

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